



WASHINGTON STATE DEPARTMENT OF
Natural Resources

Forest Practices Application/Notification Aerial Chemical Application

For DNR Region Office Use Only

FPA/N #:

Region:

Received Date:

YOU MUST USE THE INSTRUCTIONS TO COMPLETE THIS APPLICATION.

TYPE OR PRINT IN INK:

1. Complete Landowner, Timber Owner and Operator information.

<u>Legal Name of LANDOWNER</u>	<u>Legal Name of TIMBER OWNER</u>	<u>Legal Name of OPERATOR</u>
Mailing Address:	Mailing Address:	Mailing Address:
City, State, Zip	City, State, Zip	City, State, Zip
Phone ()	Phone ()	Phone ()
Email:	Email:	Email:

2. Complete contact person information.

<u>Contact Person</u>	Phone ()
	Email:

3. Are you substituting prescriptions from an approved state or federal conservation agreement or watershed analysis?

☐ No. ☐ Yes. *Only complete those portions of this application that do not have alternative prescriptions and see instructions for additional requirements.*

4. Legal description and county of the proposed spray

Sub Division (¼ ¼)	Section	Township	Range	E/W	County

5. Answer each statement as it applies to this Forest Practices Application/Notification. Refer to instructions.

- a. ☐ No. ☐ Yes. Is the activity within city limits or an urban growth area? City name: _____
- b. ☐ No. ☐ Yes. Is the activity within a public park? Park name: _____
- c. ☐ No. ☐ Yes. Is the activity within 500 feet of a public park? Park name: _____
- d. ☐ No. ☐ Yes. Is the activity located on lands platted after January 1, 1960?
- e. ☐ No. ☐ Yes. Does the application include an Alternate Plan? *If yes, include a copy of the Alternate Plan*

6. Check all that apply and include the acres that will be treated.

☐ Pesticides. Area: _____ (acres).

Include a map or detailed description of all buffers required in WAC 222-38-020(4).

☐ Fertilizers. Area: _____ (acres).

Include a map or detailed description of all buffers required in WAC 222-38-030(3).

7. Will pesticides be used under a Department of Agriculture Experimental Use Permit?

☐ No. ☐ Yes. *Include a copy of the Experimental Use Permit.*

8. Are you applying pesticides to 240 or more contiguous acres?

☐ No. ☐ Yes. *Pesticide treatment units are considered contiguous if they are separated by less than 300 feet or treatment dates of adjacent units are less than 90 days apart.*

9. List Environmental Protection Agency (EPA) and/or State registration numbers, and product names, for all chemicals proposed. Include adjuvants.

EPA/State Registration No.	Product Name (as shown on label)

10. Is your activity within 100 feet of surface water?

☐ No. ☐ Yes.

11. Is this a proposal to apply a pesticide in a Type A or Type B wetland?

☐ No. ☐ Yes. *Include a completed SEPA Environmental Checklist*

12. Have you reviewed this forest practices activity area to determine whether it may involve historic sites and/or Native American cultural resources? Read the instructions before answering this question.

☐ No. ☐ Yes.

13. We affirm that the information contained herein is true, and understand that this proposed forest practice is subject to the Forest Practices Act and Rules as well as all other federal, state or local regulations. Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.

Signature of LANDOWNER Print Name: Date:	Signature of TIMBER OWNER (If different than landowner) Print Name: Date:	Signature of OPERATOR (If different than landowner) Print Name: Date:
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Aerial Chemical Application Instructions

WAC 222-16-070, Chapter 222-38 WAC

NOTE: DNR will determine if each pesticide application is a Class IV Special and requires a State Environmental Policy Act (SEPA) Environmental Checklist. DNR will research the information detailed in the key in WAC 222-16-070. Applicants can research most of this information themselves, by visiting the Washington State University Extension Service's website at: <http://wsprs.wsu.edu/index.html> and using the PICOL database search. The only information in the key that is missing from PICOL is the maps showing areas of ground water with a high susceptibility to contamination. These maps are only available at each region office. Applicants who wish to streamline their application processing are urged to research the information in the key and provide a SEPA checklist if the key indicates their application is a Class IV Special.

1. Complete Landowner, Timber Owner and Operator information.

Print the full legal name (first, middle initial, last) and/or company/division name, mailing address (include city, state, and zip or postal code), phone number and email address of the landowner and operator.

If the operator is not known when the application is submitted, write "Same as Landowner" in the OPERATOR box. Within 48 hours of hiring (or changing) an operator, the landowner must submit a signed "Notice of Transfer Form" to the DNR region identifying the new Operator (WAC 222-20-010(9)). The original Landowner must submit a signed "Notice of Transfer Form" to DNR as soon as possible after identifying any new Landowner or Timber Owner (WAC 222-20-010(6)) for an approved FPAN.

The "Notice of Transfer Form" is available at DNR region offices and the FPARS web site. The Notice of Transfer Form requires original signatures verifying that the new Landowner(s), Timber Owner, and Operator agree to be bound by information shown on the applicant's approved Forest Practices Application/Notification AND any conditions of its approval, and to state forest practices rules.

2. Complete contact person information.

Print the name (first and last), phone number and email address of the contact person. This person will be the primary contact *only* during the time the FPA/N is processed. DNR will send copies of the decision page to the contact person *only* if they are listed as the landowner, timber owner, or operator.

3. Are you substituting prescriptions from an approved state or federal conservation agreement?

If the landowner is substituting prescriptions from an approved state or federal conservation agreement (Habitat Conservation Plan (HCP), Cooperative Habitat Enhancement Agreement (CHEA) or Landowner Option Plan (LOP)), check the 'Yes' box.

You must include a copy of the applicable conservation agreement prescriptions and indicate the corresponding Washington Administrative Codes that are being substituted by the conservation agreement prescriptions with the FPA/N. If you have prescriptions on file, please reference which prescriptions you will be using.

4. Legal description and county of the spray project.

Give a brief legal description of your proposed project. Enter the Sub-Division (e.g. SW $\frac{1}{4}$ of NW $\frac{1}{4}$), Section, Township, and Range (including East or West), and the county name

Example:

Sub Division ($\frac{1}{4}$, $\frac{1}{4}$)	Section	Township	Range	E/W	County
pt NW $\frac{1}{4}$, NW $\frac{1}{4}$	14	22	08	W	Grays Harbor
S1/2, NW $\frac{1}{4}$	14	22	08	W	Grays Harbor

For further clarification on determining the Sub-Division, see your Property Deed or contact the County Assessor's office.

5. Answer each statement as it applies to this Forest Practices Application/Notification.

- Activity is within city limits or Urban Growth Area (UGA) (RCW 76.09.050 (1) Class IV (d)).** Check this box if the proposed forest practice is within a city's limits or UGA. Enter the name of the city, if applicable, in the space provided. If your proposal is within the city limits or an Urban Growth Area, please contact the DNR Region office prior to submitting your application to see what additional information may be required. Requirements vary in each county. If you are unsure whether you are in the city limits or UGA, contact your county assessor's office or local planning department for assistance.
- Activity is within a public park (WAC 222-16-050 (1)(c))** Check this box if the proposed forest practice is within a public park and enter the name of the public park in the space provided. A completed Environmental Checklist is

required. If the SEPA process has been completed, submit a copy of the final SEPA determination and applicable approved local government permits with your FPA/N.

- c. **Activity is within 500 feet of a public park (WAC 222-20-100(1)).** Check this box if the proposed forest practice is within 500 feet of a public park and give the name of the park.
- d. **Activity is located on lands platted after January 1, 1960 (RCW 76.09.050(1) Class IV (a)).** Check this box if the proposed forest practice is occurring on land platted after January 1, 1960. A completed Environmental Checklist may be required. Please contact the DNR region office prior to submitting your application for required information. Requirements vary in each county. If you are uncertain if the land was platted after January 1, 1960, contact the county assessor.
- e. **Does the application include an Alternate Plan?** If yes, include a copy of the Alternate Plan. Alternate plans must meet the requirements in WAC 222-12-040 and WAC 222-12-0401.

6. Check all that apply and include the acres to be treated.

☐ Pesticides. Area: _____ (acres). Include a map or detailed description of all buffers required in WAC 222-38-020(4)

☐ Fertilizers. Area: _____ (acres). Include a map or detailed description of all buffers required in WAC 222-38-030(3).

Use the "Activity Map". You may request maps from the region office for projects that involve many sections. However, you must check with the region office in advance to request these maps.

"Pesticide", "insecticide", "rodenticide", "herbicide", and "other forest chemicals" are defined in WAC 222-16-010. The definition of fertilizer found in WAC 222-16-010 is, "any substance or any combination or mixture of substances used principally as a source of plant food or soil amendment".

7. Will pesticides be used under a Department of Agriculture Experimental Use Permit?

If "Yes" attach a copy of this permit. A Washington State Experimental Use Permit is required for all experiments involving pesticides that are not registered, and for all experiments involving uses not allowed by the pesticide label. Check with the Department of Agriculture to see if your pesticide is registered or check the Washington State University's Extension Service website: <http://wspr.s.wsu.edu/index.html>.

8. Are you spraying 240 or more contiguous acres?

Units will be considered contiguous if they are separated by less than 300 feet or treatment dates of adjacent units are less than 90 days apart.

9. List Environmental Protection Agency (EPA) registration numbers and product names, for all chemicals proposed, including all adjuvants.

Environmental Protection Agency (EPA) registration numbers and product names are shown on the label of the pesticide container. All pesticides and adjuvants used in Washington State must also be registered with the state department of agriculture. Use additional pages as necessary.

Example:

EPA/State Registration No.	Product Name (as shown on Label)
352-401	Oust Herbicide
524-326	Accord Herbicide
241-299	DuPont Velpar DF Herbicide

10. Is your activity within 100 feet of surface water?

Mark "Yes" if chemicals will be applied within 100 feet of BFW or CMZ, whichever is greater.

11. Is this a proposal to apply a pesticide in a Type A or Type B wetland?

If 'Yes', include a completed SEPA Environmental Checklist.

12. Have you reviewed this forest practices activity area to determine whether it may involve historic sites and/or Native American cultural resources? Read the instructions before answering this question.

DNR will review your application to determine whether it may involve Native American cultural resources. If it does, you are required to meet with the affected tribe or tribes with the objective of agreeing on a plan for protection of the archaeological or cultural value.

If you know or are unsure that your application involves Native American cultural resources, you are encouraged to contact the affected tribe or tribes as soon as possible. If the activity meets any of the criteria below it is recommended that the landowner consult with the affected Indian Tribe(s) as to possible impacts prior to submittal of the FPA/N.

Areas that are most likely to contain Native American cultural resources are:

- Along defined ridge lines and at saddles
- Flat ground near natural water (including terraces)
- Talus slopes
- Cedar tree stands containing older, scarred trees

For information on contacting tribes, visit the Washington State Tribal Directory at <http://www.goia.wa.gov>. Your DNR region office can also identify which tribe(s) to contact.

13. We affirm that the information contained herein is true, and understand that this proposed forest practice is subject to the Forest Practices Act and Rules as well as all other federal, state or local regulations. Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.

The Landowner, Timber Owner and Operator (as shown in Question 1) must **EACH** legibly print and sign their names and record the date of signature before this application can be accepted. If all three are the same, only the LANDOWNER box needs to be signed and dated. Stamped signatures and/or electronic signatures are not acceptable.